



APPLICATION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 740756-2678
In re Application of Shigeharu MONOE, et al.		
Application Number 10/731,000		Filed December 10, 2003
For MANUFACTURING METHOD FOR SEMICONDUCTOR DEVICE		
Group Art Unit 2824		Confirmation No, 6738

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows (check time period desired):

<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110)	\$110.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420)	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950)	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480)	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010)	\$

☐ Applicant claims small entity status.

☐ A check to cover the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380 (740756-2678).
I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

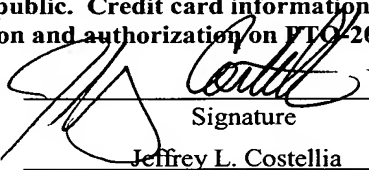
☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record.

☒ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) 35,483.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

June 14, 2004
Date


Signature

Jeffrey L. Costellia
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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SEND TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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